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Joseph W. Berenato, III Liniak, Berenato, Longacre & White, LLC Suite 240 6550 Rock Spring Drive Bethesda, MD 20817				Certificate of Mailing or Transmission  I hereby certify that this Peo(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE PLF address above, or being factsmile transmitted to the USPTO (571) 273-2835, on the date indicated below.			
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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTO	R	ATTOR	NEY DOCKET NO.	CONFIRMATION NO.
09/985,673				artley Moyes 6240.241 4016			
TITLE OF INVENTION PRODUCED THEREFRO	: METHOD OF MA M, AND DOOR MAN	NUFACTURING A M UFACTURED THEREV	OLDED DOOR SKIN VITH	FROM A FLAT	WOOD 4	COMPOSITE, DOG	OR SKIN
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUI	PREV. PAID ISSU	JE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0		\$1810	12/01/2010
EXAMINER		ART UNIT	CLASS-SUBCLASS				
NGUYEN, CHI Q 3635			052-783120				
Change of correspondence address or indication of "Tee Address" (37 CFR ± 150).      Change of correspondence address for Change of Correspondence Address form PTO/SB/123 trached.      The Address' indication for "Fee Address" indication form PTO/SB/123 fee to Castomer TO/SB/147, Rev 0/302 or more recent) attached. Use of a Castomer			2 For primiting on the patient front page, list (1) the names of up to 3 registered patient attorneys or agent OR, alternatively, (2) the name of a single firm thaving as a member a registered attorney or agent) and the names of up to 3 LLC 3 LLC				
Number is required.  3. ASSIGNEE NAME AN PLEASE NOTE: Unle recordation as set forth	D RESIDENCE DATA ss an assignee is ident in 37 CFR 3.11. Comp	TO BE PRINTED ON ified below, no assignee oletion of this form is NO	THE PATENT (print or t data will appear on the T a substitute for filing a	ype) patent. If an assig n assignment.	nce is ide	entified below, the d	document has been filed for
(A) NAME OF ASSIGNEE			(B) RESIDENCE: (CITY and STATE OR COUNTRY)				
Masonite Corporation Tampa, FL							
Please check the appropria	de assignee category or	categories (will not be p	rinted on the patent):	Individual 🖾 o	Corporatio	on or other private gr	oup entity Governmen
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Issue Fee		☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached.					
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<ol> <li>Change in Entity State</li> <li>a. Applicant claims</li> </ol>	SMALL ENTITY state	□ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). defrom anyone other than the applicant; a registered attorney or agent; or the assignee or other party in Coffice.					
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